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EXAMINER	
TOMASZEWSKI, MICHAEL	

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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Office Action Summary	Application No. 10/017,652	Applicant(s) JANAS ET AL.	
	Examiner Mike Tomaszewski	Art Unit 3626	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 02 July 2007.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 1-22 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 1-22 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|--|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413)
Paper No(s)/Mail Date. _____ |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | 5) <input type="checkbox"/> Notice of Informal Patent Application |
| 3) <input type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08)
Paper No(s)/Mail Date _____ | 6) <input type="checkbox"/> Other: _____ |

DETAILED ACTION

Notice To Applicant

1. This communication is in response to the application filed on 7/2/07. Claims 1, 10-11 and 20 have been amended. Claims 21 and 22 are newly added. Claims 1-22 are pending.

Specification

2. The following is a quotation of the first paragraph of 35 U.S.C. 112:

The specification shall contain a written description of the invention, and of the manner and process of making and using it, in such full, clear, concise, and exact terms as to enable any person skilled in the art to which it pertains, or with which it is most nearly connected, to make and use the same and shall set forth the best mode contemplated by the inventor of carrying out his invention.

3. The specification is objected to under 35 U.S.C. § 112, first paragraph, because the specification, as originally filed, does not provide support for the invention as is now claimed for the reasons in section 4, *infra*.

4. The amendment filed 7/2/07 is objected to under 35 U.S.C. 132(a) because it introduces new matter into the disclosure. 35 U.S.C. 132(a) states that no amendment shall introduce new matter into the disclosure of the invention. The added material which is not supported by the original disclosure is as follows: "wherein the dialect translator is capable of bi-directional translation between medical terms displayed to and entered by a user and corresponding equivalent but different medical terms

employed in the support operations" Applicant is required to cancel the new matter in the reply to this Office Action.

Claim Rejections - 35 USC § 112

5. Claims 10 and 20 are rejected under 35 U.S.C. § 112, first paragraph, as containing subject matter which was not described in the specification in such a way as to reasonably convey to one skilled in the relevant art that the inventor(s), at the time the application was filed, had possession of the claimed invention and for the reasons set forth in the objection to the specification in section 4, *supra*.

Applicant is advised to provide support for all features added to the amendment filed on 5/2/2006.

Claim Rejections - 35 USC § 103

6. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

NOTE: The following rejections assume that the subject matter added in the amendment filed on 7/2/07 is not new matter and are provided hereinbelow for Applicant's consideration on the condition that Applicant properly traverses the new matter objections and rejections set forth in

sections 2-5, *supra*, in the next communication sent in response to the present Office Action.

7. Claims 1-22 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao (6,283,761; hereinafter Joao), in view of Campbell et al. (6,047,259; hereinafter Campbell).

(A) As per claim 1, Joao discloses a medical support system including a memory for storing at least one medical support process relating to diagnosis and treatment of a medical condition, a processor responsive to the medical support process and to user inputs for performing the medical support process, an input device for user inputs relating to the medical support process and an output device for displaying the results of the medical support process to a user, comprising:

- (i) at least one medical record relating to a patient (Joao: abstract; col. 11, line 65-col. 12, line 17); and
- (ii) at least one medical support database including medical guidelines for the diagnosis and treatment of the medical condition (Joao: col. 16, line 33-col. 18, line 20).

Joao, however, fails to *expressly* disclose a medical support system including a memory for storing at least one medical support process relating to diagnosis and treatment of a medical condition, a processor responsive to the medical support process

and to user inputs for performing the medical support process, an input device for user inputs relating to the medical support process and an output device for displaying the results of the medical support process to a user, comprising:

- (iii) a medical support process including at least one process phase each process phase including one or more process operations;
- (iv) each of the process operations of a process phase including:
 - (1) at least one process form providing an interface between a user and the process operations of the process phase, each process form including fields for passing user inputs to the process operations and for displaying the results of the process operations to the user; and
 - (2) at least one support process responsive to user inputs, the medical record and the guidelines for performing the process operations, wherein:
 - (a) the support processes execute an interactive dialogue between the medical support process and the user to provide guidance to the user in performing the medical support process according to the guidelines and dependent upon the user inputs and the medical record; and

- (b) wherein the guidance provided to the user is capable of being overridden by the user and wherein the guidelines are dynamically updated based on user input.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses a medical support system including a memory for storing at least one medical support process relating to diagnosis and treatment of a medical condition, a processor responsive to the medical support process and to user inputs for performing the medical support process, an input device for user inputs relating to the medical support process and an output device for displaying the results of the medical support process to a user, comprising:

- (iii) a medical support process including at least one process phase each process phase including one or more process operations (Campbell: abstract; col. 1, line 49-col. 2, line 42; fig. 1-14);
- (iv) each of the process operations of a process phase including:
 - (1) at least one process form providing an interface between a user and the process operations of the process phase, each process form including fields for passing user inputs to the process operations and for displaying the results of the

process operations to the user (Campbell: abstract; col. 1, line 49-col. 2, line 42; fig. 1-14); and

- (2) at least one support process responsive to user inputs, the medical record and the guidelines for performing the process operations (Campbell: abstract; col. 1, line 49-col. 2, line 42; fig. 1-14), wherein:

- (a) the support processes execute an interactive dialogue between the medical support process and the user to provide guidance to the user in performing the medical support process according to the guidelines and dependent upon the user inputs and the medical record (Campbell: abstract; col. 1, line 49-col. 2, line 42; fig. 1-14); and
- (b) wherein the guidance provided to the user is capable of being overridden by the user and wherein the guidelines are dynamically updated based on user input (Campbell: abstract; col. 18, lines 7-10).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(B) As per claim 2, Joao discloses the medical support system of claim 1, wherein a medical support process includes:

- (i) a data phase for entering new information and reviewing historical information pertaining to the medical condition of the patient for the purposes of the medical support process (Joao: abstract; col. 19, line 64-col. 20, line 8); and
- (ii) an assessment phase for evaluation of the patient's present medical condition based upon the information from the data phase and the guidelines for the diagnosis and treatment of the medical condition (Joao: abstract; col. 18, line 65-col. 19, line 7; col. 24, line 12-col.27, line 8).

(C) As per claim 3, Joao discloses the medical support system of claim 2, wherein a medical support process further includes: a recommendations phase including process operations and guidelines to assist the user in determining a course of treatment for the patient (Joao: abstract; col. 11, line 65-col. 12, line 17; col. 16, line 33-col. 19, line 31).

(D) As per claim 4, Joao fails to *expressly* disclose the medical support system of claim 1, wherein the process form fields include fields for the display and entry of data, text, prompts, messages and user decision options.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, wherein the process form fields include fields for the display and entry of data, text, prompts, messages and user decision options (Campbell: abstract; col. 1, line 61-col. 2, line 1; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(E) As per claim 5, Joao fails to *expressly* disclose the medical support system of claim 1, wherein the process form fields include process fields containing process calls invoking corresponding support processes upon corresponding user inputs to the process fields.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, wherein the process form fields include process fields containing process calls invoking corresponding support processes upon corresponding user inputs to the process fields (Campbell: abstract; col. 1, line 61-col. 2, line 1; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(F) As per claim 6, Joao fails to *expressly* disclose the medical support system of claim 1, wherein the support operations include first support processes for invoking second support processes dependent upon user inputs.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, wherein the support operations include first support processes for invoking second support processes dependent upon user inputs (Campbell: abstract; col. 1, line 61-col. 2, line 1; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(G) As per claim 7, Joao fails to *expressly* disclose the medical support system of claim 1, wherein the support processes include support processes for displaying a next process form.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1,

wherein the support processes include support processes for displaying a next process form (Campbell: abstract; col. 1, line 61-col. 2, line 1; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(H) As per claim 8, Joao fails to *expressly* disclose the medical support system of claim 1, wherein the support processes include support processes for modifying the information displayed in a present process form.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, wherein the support processes include support processes for modifying the information displayed in a present process form (Campbell: abstract; col. 1, line 61-col. 2, line 1; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(I) As per claim 9, Joao fails to *expressly* disclose the medical support system of claim 1, wherein the medical support databases reside within the support processes.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1,

wherein the medical support databases reside within the support processes (Campbell: abstract; col. 3, line 33-col. 5, line 67; fig. 1-14).

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(J) As per claim 10, Joao fails to *expressly* disclose the medical support system of claim 1, further comprising a dialect translator for translating between medical terms displayed to and entered by a user and corresponding equivalent but different medical terms employed in the support operations, wherein the dialect translator is capable of bi-directional translation between medical terms displayed to and entered by a user and corresponding equivalent but different medical terms employed in the support operations.

Nevertheless, these features are old and well known in the art, as evidenced by Campbell. In particular, Campbell discloses the medical support system of claim 1, further comprising a dialect translator for translating between medical terms displayed to and entered by a user and corresponding equivalent but different medical terms employed in the support operations, wherein the dialect translator is capable of bi-directional translation between medical terms displayed to and entered by a user and corresponding equivalent but different medical terms employed in the support operations (Campbell: abstract; col. 15, line 5-col. 16, line 65; fig. 1-14).

Examiner respectfully submits that abnormal observations are “translated” into corresponding equivalent but different terms as tentative diagnoses. For example, an abnormal observation symptom, such as “Shaking Head or Scratching,” is translated into a tentative diagnosis (i.e., an equivalent but different medical term), such as *Otitis Externa*. See reference numerals 904 and 908 of fig. 1.

One of ordinary skill would have found it obvious at the time of the invention to combine the teachings of Campbell with the teachings of Joao with the motivation of managing medical information (Campbell: col. 1, lines 49-61).

(K) As per claim 21, Joao discloses the medical support system of claim 1, wherein user input used to override the guidance is entered in the medical record (Joao: col. 19, line 65-col. 20, line 4).

(L) Claims 11-20 and 22 substantially repeat the same limitations of claims 1-10 and 21 and therefore, are rejected for the same reasons given for those claims.

Response to Arguments

8. Applicant's arguments filed 7/2/07 have been fully considered but they are not persuasive. Applicant's arguments will be addressed below in the order in which they appear.

(A) On pages 9-11 of the 7/2/07 response, Applicant argues that neither Joao nor Campbell disclose that the guidance provided to the user is capable of being overridden by the user and that the guidelines are dynamically updated based on user input.

In response, Examiner respectfully disagrees and submits that Campbell, in particular, does indeed teach, suggest and otherwise discloses the aforementioned features. For example, Campbell teaches that a doctor can alter the treatment protocol by changing the status of a therapy item from recommended to required or vice-versa and may even add additional items to the protocol (i.e., override and dynamically update the guidance based on user input) (Campbell: col. 17, lines 58-61 and col. 18, lines 7-11).

(B) Applicant's remaining arguments in the response filed 7/2/07 rely on or re-hash the issues addressed above and in previous Office Actions and therefore, are moot in view of the responses previously given and incorporated herein.

Conclusion

9. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Mike Tomaszewski whose telephone number is (571)272-8117. The examiner can normally be reached on M-F 7:00 am - 3:30 pm.

Application/Control Number:
10/017,652
Art Unit: 3626

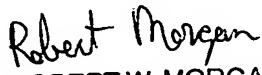
Page 15

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Joseph Thomas can be reached on (571)272-6776. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

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